

App. F. IX-4

Previous References

Med. 40-17(1-3)

1923. 29

(Med.)

File No. 69-23

Serial Nos. 2-5

Later References

General and Revenue Secretariat.

Serial Nos. 4

Part B for Aug 29.

SUBJECT

Training Sub-Assst. Surgeons
in the Ayurvedic System of
Medicine.

Sl. 4

No. 6034

16-2-25

To the Senior Surgeon.

Directs to enquire whether
there is any authorized
list of banyan medicines etc

1-8-21

Birthday Session of 22-23
(June 1823) Wed. 16.12.1.
25

SUBJECT NO. 62.

Training Sub-Assistant Surgeons in Ayurvedic system of medicine also.

Messrs. L. Vema Reddi, Malur Municipality and N. Sampangiramaia, Malur Taluk.

Mr. Vema Raddi advocated the desirability of training Sub-Assistant Surgeons in ayurvedic system of medicine as ayurvedic drugs were easily available in our country and they were better fitted to our constitutions than European medicines.

The Dewan enquired whether the full course of 8 years required for proficiency in European as well as Ayurvedic system of medicine would not be too long.

It was suggested that the length of the course might be shortened if the surgical portion of the English System of medicine was taught to students of the Ayurvedic College.

Mr. Gosai.—Said that it was more easy to obtain English drugs with certainty, but it was difficult to get Ayurvedic medicines.

The Dewan said that the matter would be noted for consideration.

In G.O. No. 3946-49 / and 46-17-3 dated the 23rd August 1918 Govt have sanctioned the grant of Scholarships at special rates, to Ayurvedic and Unani Hakim Pandits desirous of studying the for the European system of medicine and to Graduates in European medicines to study the Ayurvedic & Unani systems of medicine.

2nd ft calling for the opinion of the Senior Surgeon in the matter is subd for appl^{to} or other orders.

C.B.

1/10/23.

2687
3.12.23

First Member / 3rd 10/10

21/10

4th 21/10

5th 21.10.23

1705 (2)

Serial
No.

2

To the Senior Surgeon

Ref. 3093 of 30-10-1923.

Re the Secy's opinion.

Sms

3

Letter No 6187 dated the 10th October 1924 from the Senior Surgeon in response stating that in his opinion it is preferable to leave the Ayurvedic and Yunani systems of medicines in the hands of those who have confined their attention solely to these systems without any pretence to knowledge of the Western system of medicine so that these indigenous systems may not ~~lose~~ lose one of their essential virtues viz cheapness, which is bound to disappear, if the two systems are sought to be combined in one. In his letter under 'Consideration' the Senior Surgeon has suggested

B.
Lins
21/2

21.03

C.B.
H. C. B. J.

6) The difficulties pointed out in training
Dr. A. C. Lingen in the Sympathetic System
are (1) the difficulty of securing men
among the existing Dr. A. C. Lingen persons
qualified to undergo training in the
Sympathetic System (2) the necessity of
having to send them abroad even if
possession are available for ^{months} training, at least for 2 years
an inevitable expense which would
involve increased cost. (3) the necessity
of paying them higher for the increased
qualification ^{which they would naturally}
expect. ^{Dr. A. C. Lingen further.} That with the revised medical
store rules, simple medicines would be
~~had readily as cheap as from the~~ placed
at the disposal of the dispensaries very early
so that some of the simple medicines can be
purchased even locally by the Dr. A. C. Lingen
when the supply was short & the object is to

Serial
No.

Of the members of the R A can be achieved by the best of surgeons in the L & dispensaries being asked to use 'bazaar' medicines on a large scale than has hitherto been done for common ailments & ~~that~~ it would be preferable to leave the Sympediac & unani systems in the hands of those who have comprised their attention solely to them.

2) As it is the intention of GSA to establish Combined Automated & manual dispensers in all Air Base quarters first with men trained in those systems specifically, & in view of the increased cost which additional training of sub post engineers in the systems would involve, the opinion of the senior engineer may perhaps be accepted.

L L Lieg)

1st November

87 Dr. Mylavaram may be
implically included

1/12
3/12
8/12
4/12

$\frac{28}{5/11/22}$
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 67
 20

$$\begin{array}{r} 3693 \\ \hline 6 \cdot 11 - 24 \end{array}$$

General and Revenue
Secretariat.

File No.

of 19

(5)

Serial
No.

g) Forwarded unofficially to
 Dr. Kyloayguan, Principal, Medical
 Corps, for para of opinion
 by order
 Dr. Sarnesam
 Dr. Kauldy
 Wym.

P. T. D.

NO 10272
 25.6.24

L.O. No. 13
dated 29-12-24

12/13

Medical College,
Bangalore. (6)

10) There are two proposals for consideration - viz:-

(1) The desirability of training sub. Assist. Surgeons in Ayurvedic System of medicine, as ayurvedic drugs were easily available in our country and they were better fitted to our constitutions than European medicine.

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(2) An alternative proposal to shorten the length of the combined course by teaching the surgical portion of the English system of medicine to students of the Ayurvedic College at Mysore.

11) (1) With reference to the first proposal I beg to submit that the training of sub. Assist. Surgeons in Ayurvedic system of medicine is not likely to be of any educative value to themselves or to enhance its usefulness to the general public, quite apart -- from the consideration of extra cost and time necessarily involved in the undertaking.

12) In the first place the fundamental principles on which these two systems are built up and the conception of health and disease as taught by these two systems are so wide as the poles and the possibility of harmonising these two systems with the aid of Western Science appears to me a difficult task. The Western Medicine is a progressive science and during recent years it has advanced with rapid strides. The ground work on which this system is built up, consists of such sciences as physiology, anatomy, pathology, bacteriology, parasitology, chemistry etc, which are living sciences. The Western system of diagnosis of diseases calls in aid all the above sciences in which microscopes & Ray examination, bacteriological chemical and serological tests and electric appliances play a prominent part. It does not profess to diagnose any and every disease by the aid of the pulse only. The western system consists not only of the diagnosis and treatment of medical cases but it also deals with surgery, mid-wifery and diseases of the special organs like the eye, ear, throat, nose, brain, heart, lungs, stomach, urinary and generative organs. The volume of work done in these special branches and the special methods of diagnosis and treatment adopted in these cases are glorious records of the marvellous achievements attained by western medicine. But it is an admitted fact that Ayurvedic medicine has been a closed chapter with regard to the

specialities

specialities noted above. Even if Ayurvedic medicine is revived with the aid of Western sciences its utility will be very much limited. The aid of Western science will have yet to be sought to a very large extent, as witnessed daily in special medical institutions of the state.

3) Ayurvedic medicine as practised at the present day cannot be called a system of medicine. It is what may be styled "A system of polypharmacy". Their methods of diagnosis are obsolete and crude. The drugs used by Ayurvedic physicians need investigation and standardisation and the doses regulated by the known standard weights and measures. Many of their vegetable and metallic preparations are used in Western medicine also, but in elegant forms and in standardised doses. With so many distinct advantages in favour of Western medicine, I fail to see any advantage to training sub-assist. surgeons in an obsolete system of medicine at great cost and labour.

4) While I am opposed to the first proposal for the reasons stated above, I am aware of the fact that there are useful medicinal herbs in Ayurvedic medicine having valuable therapeutic properties which could be taught in our medical college with advantage and the object of the interpolation achieved hereby. As a preliminary step we need the creation of a chair in pharmacology, with a well equipped laboratory for research work. The Professor must necessarily be a person trained in this work. It would then be possible to investigate scientifically the action and uses of the drugs now in common use in Ayurvedic medicine, to isolate their active principles, to standardise the preparations and to fix their doses. The cooperation of the Ayurvedic physicians will also be necessary who should without any mental reservation submit their special recipes for investigation. It is in this way alone can any progressive work be done to advance the cause of Ayurvedic medicine.

15) With regard to the observations made by Mr. Vema Reddi that Ayurvedic drugs were better suited to our constitutions than European medicines, I am afraid he is treading on slippery grounds. Any sane person will admit that standardised elegant preparations in concentrated doses are better suited to any constitution than the bulky and nauseating preparations of the Ayurvedic medicine. No physiological difference in the constitutions of the different races

of mankind has even been discovered, and to assert that the action of drugs varied in different races is absurd. For instance opium, quinine, nux vomica, ~~cannabis~~ indica and many other preparations - derived from plants grown in the East do not possess different actions on individuals of different races. All are similarly affected by them and in the same degree whether the individuals be white - black or brown.

16) The so called bazaar drugs which consist chiefly of salts, ^{and} metals with the exception of some vegetable drugs are impure and -- crude, though slightly cheaper than the same drugs purified in Europe, which form elegant mixtures palatable to the taste. In treating human beings of a refined type these qualities of Europe medicines count for much. The saving to Government in bazaar drugs is a negligible quantity when compared with the large sums of money spent on medical relief.

17) The so called Ayurvedic College in Mysore is a source of danger to the community and if it cannot be placed on a better footing worthy of the name, it would be far better to close it down than to allow it to exist in its present form. The money spent on it could be usefully invested on a chair in pharmacology in the Medical -- College.

18) The students trained in this "College" are recruited from poorer classes and the best part of their time, I am told, is spent on their round of visits from house to house to obtain their daily -- bread as the scholarship given to them is hardly sufficient to keep their body and soul together.

19) The standard of general education required of them is inferior to that of the Sub. Assist. Surgeons but a knowledge of Sanskrit considered essential though this qualification is relaxed at times to suit the conscience of those in power.

20) Though the course of studies extends over a period of 4 years yet the teaching imparted to them is most elementary and theoretical. The pundits attached to this "College" are of the mediocre type quite unfitted for the task, the only attraction being the paltry allowance attached to the posts. I cannot imagine or a medical institution in the present century intended to train people the healing art, without the provision of a hospital for ~~clinical~~ observation and training which form the most fundamental and indispensable part of the training. To this type of ill-trained

is suggested to teach western surgery also. How this feat is to be accomplished with men without the preliminary study of practical anatomy and whose mental equipment is not sufficient to understand and appreciate the elementary principles of surgery will be a problem to solve. Surgery is not synonymous with butchery. An innovation of this kind would be fraught with danger both to the very class of people to whom it is proposed to afford relief at a cheaper rate and to the very science itself. Even the apparently simple operation as an opening of an abscess needs careful sterilisation of the instruments and dressings besides a knowledge of the anatomical relations of the abscess to its adjacent parts and its suitability or otherwise for surgical interference.

2) An Aneurysm (a bloody tumour) which may resemble an abscess in its physical appearance, if opened by an unsuspecting novice -- would be attended with fatal results. Surgery cannot be taught as a rule or thumb art, it needs deep study and careful training under expert hands. The students taught should possess a much higher standard of English to understand English text books than possessed by the average student of the Ayurvedic "College". Surgery in the hands of this class of men would be an additional -- weapon of evil.

22) During the tenure of my office as Senior surgeon what people in the mofassils specially wanted, was not Ayurvedic or unani dispensaries but local run dispensaries. The demand for Ayurvedic medicine appears to me an artificial one engineered by a few enthusiasts, who would themselves feel shy of Ayurvedic treatment -- when it concerned their own lives.

23) The administrative difficulties pointed out by the Senior Surgeon are additional factors for consideration. Ayurvedic and unani systems of medicine would be better appreciated by the people if they develop on lines peculiar to their ancient cult.

24) Medical relief to the people of the state in all its branches viz: medicine, surgery, mid-wifery, preventive medicine etc can only be supplied with the aid of western science and all our efforts may be usefully concentrated in strengthening the medical institutions with efficient officers and a liberal supply of medicines and surgical instruments and appliances, instead of frittering away our resources on less productive undertakings.

20-12-24.

P. H. M. S.

H. B. Myhaganam

PRINCIPAL
MEDICAL COLLEGE, BANGALORE.

(on leave).

Serial
No.

25 Reference: First member's orders
of paragraph 8 of the notes above.
Subd for orders.

C.B. AS

5/1/25

1. 2 (25)

1st member

7/1/25

82

8/1/25

8/1/25

5481

8.1.25

Training Sub-Committee
in the Dynamic System
of Medicine etc.

26 The Sub-Committee member and

My Lavagawan are not in favour of
the proposal. The latter recommends the
establishment of a library of pharmacology
with a well equipped laboratory to
investigate the modern drugs, to examine
the action principle and standardise
the drugs - This is a very costly affair
and cannot be taken up at present.

27 The Sub-Committee member and the
one interested use of bazaar medicines by
the hospitals & dispensaries - This
proposal may be accepted & a case
historical exhibit may be ~~submitted~~ asked
to purchase a copy of 'The Standard
Bazaar Medicines' if it has not
been already done.

1/2

28 Pharmacology - 1/2

Dewan

82

2.2

2

DEWAN'S OFFICE,

RECD. ON 3 FEB. 1925

REG. NO.

5553

General and Revenue
Secretariat

File No.

192

Date of submission	Date of Return	Date of issue of orders in the Secretariat	Remarks

29) Is there any authorized list of Bazaar medicines? I should like to see the book referred to by the Member.

30) Ltr letter to the Senior Surgeon is subd for appl. The information called for and the book required are not available in this office

C.B.

14/2/25

L. L. Singh

31/ appd

11/2

32/2

4) work 6034 of 16/2/25. Dr S. D. Singh in Mysore. requests to forward for reference a copy of Gent. Col. G. D. Birdwood's Book on Practical Bazaar medicine referred to by him.

G.D.
12/2

P. T. O.

24034
535
und

(12) 6.9 - 23

D

Letter no. F.C. 256-1 dated
the 18th February 1925 from
the Senior Surgeon in charge
forwarding a copy of Bindwa
Practical Bazaar Audilines
and a copy of "Bind book of County
and Bazaar Audilines" by Mr R
Santappa Chetty.

DEWAN'S OFFICE,
REGD. IN 7. APR. 1925
REG. No. 7523

(Copies to
entire)

33 Refce: - Dewari's minutes
at para 29 of the notes supra.

Sub for orders

C.B.
19/4/25 L. L. Secy)

20/2

20/1

✓ Dewari

34 Submit to Mr. M. S. S. after his return 25/2

20/2

35 Resub for orders as desired

C.B.
14/4/25 L. L. Secy)

20/2

These notes are
in action in the
20/2

Sms. 20/2

DEWAN'S OFFICE,
REGD. IN 25. FEB. 1925
Reg. No. 6250

36 too def. in the
hand on the subject
make the necessary
ask is 2-armed
I have further that file

20/2

25/4

sent up of the
31st March 1925
2/4/25 20/2
placed in file
21/4/25

(13. Med 69-237)

37 This file may be forwarded to the Mysore Branch for kind of putting up the file relating to the re-organisation of the Ayurvedic Institution, as required in the Dewan's order.

C.B. HK
27/4/25-27/4/25

Mysore Br.
Dewan

28/4/25

(Mys 784-21) was subd to the Dewan on 8.4.25, with the file required in forwarding orders of the first member of Council ~~and is in the branch~~.

88 The file is pending orders of the Dewan, Subd
1/5/25 from whom it was subd on 8.4.25.

The subject appears to be before the Council.

1/5/25

2.5.25

L.S.C Branch

Para 38 is submitted with reference to para 36.

L. S. C)

28/4/25

DEWAN'S OFFICE,	
RECD. ON	6. MAY 1925
Reg. No.	8311

Dewan

Dewan's file

12
15

88
5/5
28

The file is under circulation to Members of Council. The C.B. will, if approved, be requested to put up the file.

DEWAN'S OFFICE,	
RECD. ON	16. MAY 1925
Reg. No.	8596

9-5-25

Ys 4/10.5
C.B. M

Subd.

Council file re. Reorganization of Ayurvedic College in Mysore was subd to Extra Member on 18. May 1925 with the Council note "that the file be subd to Extra Member and then brought up." The file has not yet come back from the Member.

The file recd. into the Extra Member's minute today is ~~forwarded~~ placed below -
Dewan's Office
Mysore Branch
16.5.25
The minute will be brought up to the Council.

Extra Member) 12.5.25

Serial
No

This file was found in the
Muzrai Branch along with
some old records kept in an
almshouse. Records re-
cognizing the Agumandore
College at Mysore were
issued in August 1928. This
file will be appended to
returned to the G. M.
Branch.

C. B. 4/1/29
26/6/29 27/6/29

Wm
28/6

Supr. G. M. Por with complete

Wm
28/6

These papers will be filed, if good

Wm

12/8/29

Wm
12/8

B. M.
13/8/29

SUBJECT

Diary No. of letter replied to 1208

Section Indol
File No. 69-23
Serial No. 2

General and Revenue Secretariat

(LSH)
the 192

No. L3093

Date of issue 26/10/23

To The Senior Surgeon
in Mysore, Bangalore.

Signed by M. J. N.

In the matter of the
training of Subtest
Surgeons in Ayurvedic
system of medicine
also

Sir,
I am directed to
invite reference to
Subject No 62 of the
Proceedings of the Birthday
Session of the R. A of 1922
23 and the reply of the
Deewan thereto and to
request you to be
so good as to forward
Government with your
opinion on the reser-
vation, at a very
early date.
I have &c

M. J. N.

1271

WD 6632 - GPB-18000-16-6/23

See to Govt
Local & Legislative
Deptt

26/10/23

RE. 16

No. 6.187
Enc. 1

11

CA No 162
12.10.24

DN 02403

1316

8-1
11/10
B. N
Sir,
With
30th Octo

Ind 69-23-3

[Handwritten signature]

The primary difficulty will be to secure, from among the existing Sub Assistant Surgeons, persons qualified to undergo training in the two systems, i.e., possessing a sufficient knowledge of Sanskrit in the case of Ayurveda and Urdu or Persian in the case of the Yunani system. In view of the fact that the Ayurvedic College at Mysore is yet far from being a properly developed institution and that students who passed out of this institution were deputed to Calcutta for further training, it is reasonable to think that eligible Sub Assistant Surgeons will, if at all, have to be deputed to Calcutta for training in the Ayurvedic system and to the Tibbia College, Calcutta for Yunani system. It is just possible that the Sub Assistant Surgeons might secure an exemption of two years (out of four) as regards the first two courses in Anatomy, Physiology and Surgery in view of their having undergone training in these subjects in the Medical Schools during their L.M.P. course. They will therefore have to undergo at least a two years' course in Materia Medica, Pharmacy and Medicine as

(17)

as also in diseases peculiar to the two systems.

It is a well known fact that the scale of pay of Sub Assistant Surgeons in this State is already very much lower than what obtains in other parts of India and that there is, in consequence, a certain amount of discontentment in the minds of the local Sub Assistant Surgeons. Making the Sub Assistant Surgeons, who have already undergone a hard course of four years, to undergo a further course of two years in a practically new study, will necessarily raise in their minds a hope of expectation of higher emoluments after completing the new training, besides a decent stipend during the training. As most of the Sub Assistant Surgeons are family men with responsibilities they will, not unreasonably, expect to be sufficiently paid to maintain their families here and themselves at Calcutta or Delhi during training. I think an allowance (or stipend) of at least Rs75/- per mensem may have to be allowed in each case. Again, wherever this system is proposed to be tried, the public may demand for equal scope being given to Ayurveda and Yunani systems, which means two Sub Assistant Surgeons, one versed in Ayurvedic and another in the Yunani System.

It does not seem, on the whole, that the suggestion, if accepted would be an improvement as regards cost, which is the chief object aimed at in the discussion, as far as can be gathered. It is quite true that Europe Medicines are costly and that, at least in the past, there have been delays in complying with indents in certain cases. But such inconveniences will be guarded against in future. In fact, proposals for revising the rules for the working of the Medical Stores are already before the Government and these are expected to obviate or minimise delays.

It may also be added here that most of the medicines and drugs included under "Europe Medicines" are the products got out of medicinal plants, mineral salts &c., procurable in India under the designation of "Bazaar Medicines" and it is incumbent on all Sub Assistant Surgeons to use the latter whenever they are short of a supply of the former. There are recognised books like "Lt. Col. Birdwood's Bazaar Medicines" which describe the uses of the indigenous drugs with reference to ail-

ailments described according to English nomenclature of disease familiar to Sub Assistant Surgeons and the object desired by the representative members, so far as our Local Fund Dispensaries are concerned, will be possible of achievement by our insisting on the Sub Assistant Surgeons to use Bazaar Medicines on a larger scale than they have hitherto done. A copy of the preface which ^{describes} ~~describes~~ the scope of the book is enclosed for favor of perusal.

Should the above view commend itself to Government, it would be preferable to leave the Ayurvedic and Yunani systems in the hands of those who have confined their attention solely to those systems, without any pretence to a knowledge of the Western system of medicine, so that these indigenous systems may not lose one of their essential virtues, Viz., cheapness, which is bound to disappear if the two systems are sought to be combined in one person.

I have the honor to be,

Sir,

Your most obedient servant,

M. K. Sen

SENIOR, SURGEON, M.G.

ARM.

At the big medical schools, attached to our big hospitals in the course on Materia Medica, Indian plants and drugs receive attention, but in the wards of the big hospitals, which institutions have an ample supply of European drugs, bazaar medicines are practically never prescribed, so that men leave the medical schools with little practical knowledge of prescribing bazaar medicines.

Also the books on Indian medicinal plants and drugs as Nadkarni, Khory and Mooden Sherif, interesting and useful as they are give a vast amount of detail and describe many drugs which are practically never used. Nadkarni describes 419 drugs. Many are of great value, many have very slight therapeutic value. The majority are of no practical value to the medical practitioner. Big manufacturing and pharmaceutical chemists are needed in India, who can make and standardize preparations and put them on the market.

It is hoped this little book, by being very brief and putting up definite prescriptions of bazaar drugs, may be of help to practitioners.

-----:oOo:-----

SUBJECT _____

Diary No. of letter replied to 2403

General and Revenue Secretariat

(L.S. 9)

the 192

Date of issue 16th Feb 1925Signed by Mr. G. R. S. Dyer

Section

Med

File No.

69-23

Serial No.

4

No.

L 6034

To

The Senior Surgeon
in charge, Bangalore
Dist,

With reference to your letter No 6187 dated 16th 10th/11th October 1924 furnishing ~~the~~ ^{your} views on the question of training Sub Asst Surgeons in the Ayurvedic and Unani systems of medicine, I am directed to enquire whether there are any authorities of Bangalore medicine and to request you to be good enough

over

ESM
12/2

to forward for reference
a copy of Lieut Col. G T
Birdswood's book on
"Practical Bay and Medicines"
referred to in your letter under
reply, at a very early date.
I have &c

M/P. See to Genl
Adl Dept.

C.B.
11/2/25
M

35336

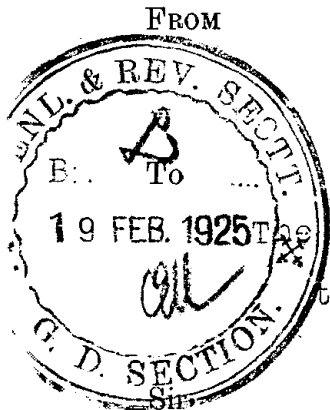
MYSORE MEDICAL DEPARTMENT

No. 4.C.256-1

Encl. 3.

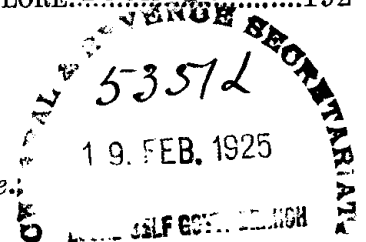
OFFICE OF THE SENIOR SURGEON
WITH THE GOVT. OF MYSORE,

BANGALORE. 18th Feb 1925



B. Mahomed Usmon Esq., L.M.S.,
Senior Surgeon with the Government of

His Highness the Maharaja of Mysore,
Bangalore.



The Secretary to the Government of His Highness
the Maharaja of Mysore, Local & Legislative Departments
Bangalore.

With reference to your letter No.L.6074-Med.69-23-4, dated the 16th February 1925, I have the honor to forward herewith, as desired, Birdwood's Practical Bazaar Medicines, Second Edition, for favor of reference and kind return when done with.

As regards authorised list of country medicines, I have the honor to enclose a list of articles included under the head "Country Medicines" and at present supplied to Local Fund Dispensaries from the Medical Stores, annually, on indents. These articles have been in use for a very long time. There is no other authorised list. I also enclose a copy of "Handbook of Country and Bazaar Medicines" by B.Santappa Chetty, a Mysore publication, which was supplied to the several L. F. Dispensaries in the State, about the year 1900. The book appears to be now out of print.

I have the honor to be,

Sir,

Your most obedient servant,

B. Mahomed Usmon

Senior Surgeon.